PTO/SB/06 (12-04) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
APPLICATION AS FILED - (Column 1)					<del>.</del>		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	N	UMBER FILED	NUMB	ER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	IC FEE CFR 1.16(a), (b), or	(c))						1			
	RCH FEE CFR 1.16(k), (i), or (i	m))									_
	MINATION FEE FR 1.16(0), (p), or	(q))									
TOTAL CLAIMS (37 CFR 1.16(i))			minus 2	0 =			x =		OR	x =	
	EPENDENT CLA CFR 1.16(h))	IMS	minus	3 = •			x =			x =	
FEE	LICATION SIZE CFR 1.16(s))	shee is \$2 addit	ts of paper, t 50 (\$125 for ional 50 shee	n and drawings of the application s small entity) for ets or fraction th )(G) and 37 CF	ize fee due each ereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II						_	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAININ AFTER AMENDME	iG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	. 17	Minus	(C)	=		x =		OR	x =	
	Independent (37 CFR 1.16(h))	· 3	Minus	<sup>**</sup> 3	=	1	x =		OR	х =	
	Application Size Fee (37 CFR 1.16(s))										
<b>'</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1	)	(Column 2)	(Column 3)				_		
AMENDMENT B		CLAIMS REMAININ AFTER AMENDME	l	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	•	Minus	**	=		x =		OR	x =	
	Independent (37 CFR 1.16(h))	•	Minus	***	=		x =	·	OR	х =	
	Application Size Fee (37 CFR 1.16(s))										
$\square$	FIRST PRESENT	ATION OF MUL	TIPLE DEPEND	ENT CLAIM (37 CF	R 1.16(j))				OR		
				-		,	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20. enter "20".											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 CLAMS AS FILED PARTI OTHER THAN (Column 1) SMALL ENTITY TYPE -TOTAL CLAIMS 750.08 TOTAL CHÂRGEABLE CLAINS INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESEN If the difference in column 1 is less than zero, enter 0 in column'2 CLAIMS AS AMENDED PART IL SMALLENTITY OR CLAIMS 1 NUMBER PRESENT TIONAL PREVIOUSLY F AFTER : EXTRA FIRST PRESENTATION OF MULTIPLE DEPENDENT GLAIM (Column 1) (Column 2) (Column<sub>3</sub>) CLAIMS; HIGHEST REMAINING PRESENT NUMBER PREVIOUSLY AFTER EXTRA PAID FOR TOWN X\$ 9= OR independent : X42= X84= OR: FIRST: PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR (Column 3) PRESENT RATE PHEVIOUSE EXTRA PAID FOR Total Minus X\$ 9= independent X42= PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

If a "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."